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| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/564,561 | 11/30/2006 | Suhung-Gwon Kim | 2443.0040000 | 3319 |

26111 7590 07/20/2010
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| EXAMINER |
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SEOH, MINNAH L

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| ART UNIT | PAPER NUMBER |
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3686

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| MAIL DATE | DELIVERY MODE |
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07/20/2010

PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

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| Office Action Summary | Application No. 10/564,561 | Applicant(s) KIM, SUHUNG-GWON | |
| | Examiner MINNAH SEOH | Art Unit 3686 | |

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) OR THIRTY (30) DAYS, WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

- 1) ☒ Responsive to communication(s) filed on 29 June 2010.
- 2a) ☒ This action is **FINAL**. 2b) ☐ This action is non-final.
- 3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

- 4) ☒ Claim(s) 1-9 is/are pending in the application.
- 4a) Of the above claim(s) none is/are withdrawn from consideration.
- 5) ☐ Claim(s) _____ is/are allowed.
- 6) ☒ Claim(s) 1-9 is/are rejected.
- 7) ☐ Claim(s) _____ is/are objected to.
- 8) ☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

- 9) ☐ The specification is objected to by the Examiner.
- 10) ☒ The drawing(s) filed on January 12, 2006 is/are: a) ☐ accepted or b) ☒ objected to by the Examiner.
Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).
Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
- 11) ☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

- 12) ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
- a) ☐ All b) ☐ Some * c) ☐ None of:
1. ☐ Certified copies of the priority documents have been received.
 2. ☐ Certified copies of the priority documents have been received in Application No. _____.
 3. ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

* See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

- | | |
|---|---|
| 1) <input type="checkbox"/> Notice of References Cited (PTO-892) | 4) <input type="checkbox"/> Interview Summary (PTO-413) |
| 2) <input type="checkbox"/> Notice of Draftperson's Patent Drawing Review (PTO-948) | Paper No(s)/Mail Date. _____ |
| 3) <input type="checkbox"/> Information Disclosure Statement(s) (PTO/SB/08) | 5) <input type="checkbox"/> Notice of Informal Patent Application |
| Paper No(s)/Mail Date _____ | 6) <input type="checkbox"/> Other: _____ |

DETAILED ACTION

Status of Claims

1. This action is in reply to the Amendment/Response filed on 29 June 2010.
2. Claims 1-8 were amended.
3. Claim 9 was added.
4. Claims 1-9 are currently pending and have been examined.

Drawings

5. New corrected drawings in compliance with 37 CFR 1.121(d) are required in this application because the drawings are illegible in places and Korean is used throughout. Please see MPEP 608.02 for further explanation. Applicant is advised to employ the services of a competent patent draftsman outside the Office, as the U.S. Patent and Trademark Office no longer prepares new drawings. The corrected drawings are required in reply to the Office action to avoid abandonment of the application. The requirement for corrected drawings will not be held in abeyance.

6. The Examiner notes that Applicant stated in the Remarks filed 29 June 2010 that formal drawings are being prepared. However, the requirement for corrected drawings will not be held in abeyance.

Claim Rejections - 35 USC § 102

7. The following is a quotation of the appropriate paragraphs of 35 U.S.C. 102 that form the basis for the rejections under this section made in this Office action:

A person shall be entitled to a patent unless –

(b) the invention was patented or described in a printed publication in this or a foreign country or in public use or on sale in this country, more than one year prior to the date of application for patent in the United States.

8. Claims 1-8 are rejected under 35 U.S.C. 102(b) as being anticipated by Campbell et al. (US 6047259).

CLAIM 1 –

As per claim 1, Campbell et al. disclose a method comprising:

- managing medical information for treating patients in such a manner that a service-providing system (***The remote computer 149 is usually a server see col. 5 ll. 9-10 of Campbell et al.***) transmits a doctor web screen, a nurse web screen, and an laboratory web screen for medical information management to a doctor terminal, a nurse terminal, and an laboratory staff terminal connected to the service-providing system over the Internet or an Intranet (***Internet see col. 5 ll. 25 of Campbell et al.***), respectively stores information input through the web screens from the terminals to share the information through the respective web screens (***server software coordinates communication among the client computers, manages a database of client and patient data see col. 3 ll. 55-57 of Campbell et al.***)
- providing, by the service-providing system, a menu on the web screens, the menu allowing a user to add, delete and modify the medical record forms provided through the web screens so that the user inputs medical information on patients, and storing the added, deleted and modified medical record forms (***see Fig. 3 of Campbell et al.***)

- providing, by the service-providing system, providing a list of the stored medical record forms if there is a request for inspection of the list, and providing the medical record forms selected from the list through the web screens (***series of buttons 410 that list and navigate to screens used to obtain input and guide the user through the physical exam see Fig. 4; col. 12 ll. 18-20 of Campbell et al.***)
- providing, by the service-providing system, providing a menu through the web screens, the menu allowing the user to directly select a medical record form provided as a default record form through the web screens (***series of buttons 410 that list and navigate to screens used to obtain input and guide the user through the physical exam see Fig. 4; col. 12 ll. 18-20 of Campbell et al.***), and providing the selected medical record form as a default document through the web screens (***many of the observations listed in the exam screens default to normal see col. 13 ll. 19-20 of Campbell et al.***)

Note that the different web screens and terminals are considered intended use since they are not sufficiently defined in the specification as to patentably distinguish them from each other.

CLAIM 2 –

Campbell et al. disclose the method of claim 1 above. Campbell et al. further disclose:

- providing, by the service-providing system, providing a menu through the web screens, the menu allowing the users to insert an image into the medical record forms, wherein the image is either a photographed image obtained by photographing a wound portion of a patient or an image template used for illustration (***screen 700 used to prompt the user for graphical input of medical observations see col. 15 ll. 56-57 of Campbell et al.***), and is stored together with the medical information on patients input into the medical record forms (***the client software records medical observations as observation records in a database file see col. 16 ll. 5-6 of Campbell et al.***)

CLAIM 3 –

Campbell et al. disclose the method of claim 2 above. Campbell et al. further disclose:

- wherein the photographed image is stored in at least one of the doctor terminal, the nurse terminal, and the laboratory terminal, is uploaded to the service-providing system through the menu enabling the insertion of the image, and is stored together with the medical information on patients (***the client software records medical observations as observation records in a database file see col. 16 ll. 5-6 of Campbell et al.***)

CLAIM 4 –

Campbell et al. disclose the method of claim 2 above. Campbell et al. further disclose:

- wherein the image template used for illustration is uploaded to or modified or deleted in the service-providing system by an image template management menu provided on the web screens (***screen 700 used to prompt the user for graphical input of medical observations see col. 15 ll. 56-57 of Campbell et al.***), and the uploaded or modified image template is stored in a folder designated by the user or automatically in a folder designated according to the user information and is stored together with the medical information on patients through the menu enabling the insertion of the image (***the client software records medical observations as observation records in a database file see col. 16 ll. 5-6 of Campbell et al.***)

The choice of where to store the image template would have been obvious to one of ordinary skill in the art at the time of the invention. In order to simplify the filing system, it would have been obvious to create a folder with all of a patients files and continue storing all information on the patient in that folder.

CLAIM 5-8 –

Campbell et al. disclose the methods of claims 1-4 above. Campbell et al. further disclose:

- wherein the medical record forms are classified and managed according to doctors or treatment departments, and authority to add, delete and modify the medical record forms can be limited (***the server 202 maintains a table that lists computers and users indexed to data and functions that the computer or user can access....This table keeps track of who is logged into the system and determines, based on who is logged in, what functions and data each person will be able to access see col. 6 ll. 26-33 of Campbell et al.***)

CLAIM 9 –

Campbell et al. disclose the methods of claim 1 above. Campbell et al. further disclose:

- wherein the medical record forms are forms for inputting and inspecting medical information on patients including treatment information (***Vaccination/Deworming see Fig. 4 of Campbell et al.***) , nursing information (***Temperature History see Fig. 5 of Campbell et al.***) , and examination record information (***see Fig. 8 of Campbell et al.***) through a web screen.

Response to Arguments

9. Applicant's arguments filed 29 June 2010 have been fully considered but they are not persuasive.

10. With regards to Applicant's argument that Campbell does not disclose a "service-providing system transmits a doctor web screen, a nurse web screen, and a laboratory web screen for medical information management to a doctor terminal, a nurse terminal, and an laboratory staff terminal," this argument is unpersuasive. The specific terms "doctor web screen," "nurse web screen," and "laboratory web screen" are not given

specific definitions in the specification. Several examples are given in the disclosure including several illegible drawings. Since there is not distinguishing feature about the different screens, those limitations were interpreted to be intended use. Therefore, a “doctor web screen” was interpreted to be a web screen that a doctor uses. Since all of the specified functionality required in the claims was found in Campbell, the claim was fully disclosed by prior art.

11. With regards to Applicant’s argument that Campbell does not disclose a “medical record form,” this argument is unpersuasive. Applicant has introduced a new definition for “medical record form.” By simply applying the definition of “medical record” to form. Another interpretation of “medical record form” could be a form in a medical record. The Examiner notes that the Applicant’s disclosure on page 6 ll. 22-27 states “At this time, the forms are forms into and from which medical information on patients such as various treatment information, nursing information, and examination record information on patients is input or read, and refer to forms that can be implemented through a web screen instead of a conventionally used paper chart (hereinafter, referred briefly to as a “medical record form”).” If Applicant wishes to define a medical record form as “a systematic documentation of a patient’s individual medical history and care” and not as currently defined in the disclosure, the Applicant is invited to amend. Regardless, Campbell does disclose past symptom and history care as well as current symptom (***the provider can retrieve more detailed medical history data, including diagnoses see col. 12 ll. 57-58 of Campbell et al.***). For purposes of examination, the broadest

reasonable interpretation has been used. A medical record form is interpreted to be a form in a medical record. This is consistent with the description of medical record form currently in the disclosure as a form on which patient information is entered and can be implemented through a web screen.

12. With regards to Applicant's argument that Campbell does not disclose "a menu allowing a user to add, delete and modify the medical record forms," this argument is unpersuasive. The limitation pointed out by Applicant in its entirety states "providing, by the service-providing system, a menu on the web screens, the menu allowing a user to add, delete and modify the medical record forms provided through the web screens so that the user inputs medical information on patients, and storing the added, deleted and modified medical record forms." This was interpreted by the Examiner to be a menu on a screen that allows a user to input medical information which then modifies the form in some way. Fig. 3 clearly shows a button (item 320 "Ready For Check Out") that will allow the user to input information and will therefore modify the form. The limitation was interpreted by the functionality of the method step recited. The Applicant is invited to amend in order to clarify Applicant's intent.

13. With regards to Applicant's argument that Campbell does not disclose "providing a list of the medical record forms if there is a request for inspection of the list and providing the medical record forms selected from the list through the web screens," this argument is unpersuasive. Applicant is using a definition for "medical record form" that is not consistent with the definition provided in the disclosure. The Examiner has

examined the case and provided art based on the definition in the disclosure. Applicant is encouraged to amend if Applicant feels this definition is not sufficient. With regards to the "providing a list," Fig. 4 provides a list of forms that can be examined in item 410.

14. With regards to Applicant's argument that Campbell does not disclose "the menu allowing the user to directly select a medical record form provided as a default record form through the web screens, and providing the selected medical record form as a default document through the web screens," this argument is unpersuasive. The current claim language only states that on a menu a user can select a medical form which has a default. Paragraph 53 of the specification is not in the claim language and an explicit definition was not found by the Examiner limiting the "default" to be the default clinical department in paragraph 53. The Applicant is encouraged to amend to limit the functionality of the "default" to the embodiment described in paragraph 53 if Applicant feels this better captures the invention.

Conclusion

15. Applicant's amendment necessitated the new ground(s) of rejection presented in this Office action. Accordingly, **THIS ACTION IS MADE FINAL**. See MPEP § 706.07(a). Applicant is reminded of the extension of time policy as set forth in 37 CFR 1.136(a).

A shortened statutory period for reply to this final action is set to expire THREE MONTHS from the mailing date of this action. In the event a first reply is filed within TWO MONTHS of the mailing date of this final action and the advisory action is not mailed until after the end of the THREE-MONTH shortened statutory period, then the shortened statutory period will expire on the date the advisory action is mailed, and any extension fee pursuant to 37 CFR 1.136(a) will be calculated from the mailing date of the advisory action. In no event, however, will the statutory period for reply expire later than SIX MONTHS from the date of this final action.

Any inquiry concerning this communication or earlier communications from the examiner should be directed to MINNAH SEOH whose telephone number is (571) 270-7778. The examiner can normally be reached on 9:00 AM - 4:00 PM Monday-Thursday.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Jerry O'Connor can be reached on (571) 272-6787. The fax phone number for the organization where this application or proceeding is assigned is (571) 273-8300.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a USPTO Customer Service Representative or access to the automated information system, call 800-786-9199 (IN USA OR CANADA) or (571) 272-1000.

/M. S./
Examiner, Art Unit 3686

/Gerald J. O'Connor/
Supervisory Patent Examiner
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